

# Jack Hopkins Social Services Funding Application

## Program Funding Sheet

### **Lead Agency:**

Name \_\_\_\_\_

Is the Lead Agency a 501(c)(3)? ☐ Yes ☐ No

Address where Project will be facilitated or housed:

\_\_\_\_\_

Name of Project Administrator: \_\_\_\_\_

Address \_\_\_\_\_

Telephone & E-mail \_\_\_\_\_

Name of other participating agencies, if different from Lead Agency: \_\_\_\_\_

\_\_\_\_\_

### **Proposed Project:**

Title of Project: \_\_\_\_\_

Total Cost of Project: \_\_\_\_\_

Requested JHSSF Amount: \_\_\_\_\_

### **Other Funds Expected for Project:**

Amount	Source	Confirmed or Pending
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\_\_\_\_\_

\_\_\_\_\_

Number of Clients Served by this Project in 2009: \_\_\_\_\_

Number of City Residents Served by this Project in 2009: \_\_\_\_\_

Is this a request for operational costs? ☐ Yes ☐ No

If "yes," is the request for a pilot project or for bridge funding? ☐ Pilot ☐ Bridge

### **Funding Information:**

*Example:*

*Tables: 5 tables @ \$12.00 each*

*Chairs: 20 chairs @ \$8.00 each*

*Please note:* Due to limited funds, the Committee often recommends partial funding for a program. In the interest of helping the Committee best decide how to distribute funds, please provide an itemized list of program elements, ranked by priority and their costs.

ITEM

COST

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Claim Submission**

☐ July 2009 – September 2009 ☐ October 2009 – December 2009

**Date:** (*check one*)

☐ Other Dates Needed - As Explained in Application

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## Agency Contact Sheet

### **Lead Agency:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone & E-Mail: \_\_\_\_\_

Website: \_\_\_\_\_

President of Board of Directors: \_\_\_\_\_

### **Director Information**

Director of Lead Agency: \_\_\_\_\_

Director's Address: \_\_\_\_\_

Phone & E-Mail: \_\_\_\_\_

### **Presenter Information**

Name of Person to Present  
Application to the Committee \_\_\_\_\_

Address \_\_\_\_\_

Phone & E-mail \_\_\_\_\_

### **Grant Writer Information**

Name of Grant Writer: \_\_\_\_\_

Address: \_\_\_\_\_

Phone & E-Mail: \_\_\_\_\_

### **Please also include:**

- The Agency's Mission Statement in Two-Page Application Narrative
- A Simple Program Budget for use of requested funds (please check your math)
  - A year-end financial statement that includes fund balances and total revenue & expenditures